

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

DECLARATION

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first, and sole inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled

THERAPEUTIC DELIVERY BALLOON

the specification of which is filed herewith.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by an amendment, if any, specifically referred to in this declaration.

I acknowledge the duty to disclose all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, Section 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

None

I hereby claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, Section 112, I acknowledge the duty to disclose all information known to me to be material to patentability as defined in Title 37,

Code of Federal Regulations, Section 1.56, which became available between the filing date of the prior application and the national or PCT international filing date of this application:

None

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole inventor : Maria Palasis
Inventor's signature : M. Palasis
Date : 1/10/2001
Residence : 65 Martin Road
Wellesley, MA
Citizenship : U.S.
Post Office Address : same as above

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor(s): Maria Palasis

Serial No.: To Be Assigned

Filing Date: Herewith

For: THERAPEUTIC DELIVERY
BALLOON

Group Art Unit: To Be Assigned

Examiner: To Be Assigned

Honorable Commissioner of Patents and Trademarks
Washington, DC 20231**GRANT OF POWER OF ATTORNEY PURSUANT TO 37 C.F.R. § 3.71**

S I R:

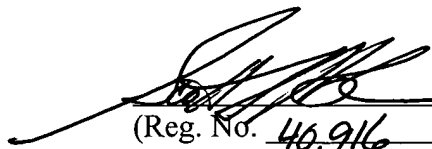
Assignee hereby appoints: Charles R. Brainard (Reg. No. 21,069); Estelle J. Tsevdos (Reg. No. 31,145); James Prizant (Reg. No. 34,067); David L. Cavanaugh (Reg. No. 36,476); Peter J. Gafner (Reg. No. 36,517); Luke Dohmen (Reg. No. 36,783); Judith Toffenetti (Reg. No. 39,048); Houry Khalilian (Reg. No. 39,546); Albert K. Kau (Reg. No. 40,672); Robert M. Rauker (Reg. No. 40,782); Scott T. Bluni (Reg. No. 40,916); Kristina Jahns (Reg. No. 41,092); Timothy M. Devlin (Reg. No. 41,706); William M. Merone (Reg. No. 41,993); Todd P. Messal (Reg. No. 42,883); William J. Shaw (Reg. No. 43,111); Fred Grasso (Reg. No. 43,644); and Paolo M. Trevisan (Reg. No. 45,164) to prosecute this application and transact all business in the U.S. Patent and Trademark Office connected therewith. All previous Powers of Attorney in connection with this application are hereby revoked. Please send all correspondence to

Charles R. Brainard
KENYON & KENYON
One Broadway
New York, NY 10004

and direct all phone calls to Charles R. Brainard at (212) 425-7200.

The undersigned (whose title is supplied below) is empowered to sign this certificate on behalf of the assignee.

16 JAN 2001
Date


(Reg. No. 40,916)
Patent Counsel

on behalf of:

SCIMED LIFE SYSTEMS, INC